PTO/SB/06 (08-03)
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Dilaci die 7 a	DATEN	T A DDI 16	1 1995, NO	persons are requ	ired to respond	to a collection o	Information unic	ess it displ	ays a valid OMB	control number.
	PAIEN	I APPLIC	JAIIOI	N FEE DETE ute for Form PT	RMINATIC	N RECOR	Page 7.		tton of Docket N	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMAI	<i>O</i> L ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR		NUMBER FILED NUMB			ER EXTRA	RATE	FEE	]	RATE	FEE
BASIC FEE (37 CFR 1.16(a)	)	·					\$	OR	- 10112	. "55
TOTAL CLAIMS (37 CFR 1.16(c)		· .	minus 20 = *			X \$		1 .		<b>  `</b>
INDEPENDENT CLAIMS (37 CFR 1.16(b))			minus 3 = •					·OR	X \$=	
					× \$	-	OR	X \$=	*	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						+;	-	OR	+\$=	:
* If the differen	ce in colum	n 1 is less tha	an zero, e	nter "O" in column :	TOTAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II									
	((	Column 1)		(Column 2)	(Column 3)	CMAI	1 E117777	OR	OTHE	R THAN
4		CLAIMS	<del>                                     </del>	HIGHEST	<u> </u>		L ENTITY	1	SMALL	ENTITY
[ [ [ 2] ] 2	Na	EMAINING AFTER MENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.1	• • • • • • • • • • • • • • • • • • • •	21	Minus	66	* (5)	X \$:		OR	X \$_ =	<u> </u>
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FIRST PR	ESENTATIO	N OF MULTIPLE	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+s		OR		
						TOTAL			TOTAL	
		Column 1)		(Column 2)	(Oakuu - 0)	ADD'L FEE	·	OR	ADD'L FEE	<u> </u>
<u>m</u>		CLAIMS		(Column 2) HIGHEST	(Column 3)			· ·	·	
<u> </u>	· 1	EMAINING AFTER IENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADJI TIO, AL FEE
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Independe	nt ((b))		Minus	to.	=	X \$ =		OR OR	X\$ =	<del>:</del>
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				TOTAL	· ·		TOTAL			
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		CLAIMS		(Column 2) HIGHEST	(Column 3)			I	<del></del>	
	RI	EMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL	·	RATE	ADDI-
Total	•	ENDMENT	Minus	PAID FOR	=	· · ·	FEE			TIONAL FEE
(37 CFR 1.10 Z Independe		<u> </u>	Minus	***		X \$=		OR	x \$=	
Total (37 GFR 1.16)  Independe (37 GFR 1.16)  WY	<b>(b)</b>	<u>: · </u>	WIIIUS			x \$=		OR	x \$=	
✓ FIRST PRI	SENTATIO	N OF MULTIPLE	DEPEND	ENT CLAIM (37 CFI	R 1.16(d))	+\$=		OR	+ ; =	
i .	•					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										
I """ If the "Highest Number Previously Paid For" IN THIS SPACE is lose than 3 anter "2"									<b>*</b>	
The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.										

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/889251

CLAIMS AS FILED - PART I (Column 2) (Column 2)							SMALL EN	SMALL ENTITY TYPE OF		OTHER SMALL		
TOTAL CLAIMS							RATE	FEE		RATE	FEE	
FOR			ŅUMBĘA	FILED	NUMB	ER EXTRA	BASIC FEE	50	OR	Basić Fee	-	
TOTAL CHARGEABLE CLAIMS			44 minus 20=		24		X\$ 9=	216	OR	X\$18=		
INC	EPENDENT CL	AIMS	4 mi	nus 3 =	• 1		X40=	40	OR	X80=		•
MULTIPLE DEPENDENT CLAIM PRESENT						+135=	135	OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL	441	OR	TOTAL		·	
CLAIMS AS AMENDED - PART II									-	OTHER		
(Column 1) (Column 2) (Column 3)							SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVK PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	्रा स्ट्रिक
	Total	. 28	Minus	.66	科	•	X\$ 9=		OR	X\$18=		618-54
	Independent	• (0	Minus	989	3,	-	X40=		OR	X80=		. •
L	FIRST PRESE	NTATION OF M	JUTIPLE DEI	ENDEN	CLAIM	<del></del>	+135=		OR	+270=	·	
							TOTAL		OR	TOTAL		,
				'Calu	A\	(Column 3)	ADDIT. FEE			ADDIT. FEE		
_		(Column 1)		(Colu	(EST	Columns	T	ADDI-			ADDI-	• .*
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA	RATE	TIONAL, FEE		RATE	TIONAL FEE	
Ž Q	Total	· 21	Minus	•• 4	de	= .Ø	X\$ 9=	\	OR	X\$18=		
E	Independent	• 2	Minus	***	8	-0	'X40=		OR	X80=	,	-
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENI	CLAIM		+135=		OR	+270=		<i>:</i> ·
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		(Column 1) CLAIMS	gring keep	(Colu	mn 2) (EST	(Column 3)	-	ADD!			ADDI-	
ENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	RAȚE	ADDI- TIONAL FEE		RATE	TIONAL	· .
D WE	Total ·	. 23	Minus	•• (	06	= Ø.	X\$ 9=		OR	.X\$18=		
AMENDM	Independent	. 2	Minus	•••	8	- /	X40=	1	OR	X80=		•
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +135=  OR +270=										<b>.</b>		
TOTAL										. •		
"If the they in column is less than 15 decay in the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE												
The Highest Number Previously Pard For (Total or Independent) is the highest Number of the Transfer of Total or Independent in the Highest Number of Total or Independent in the Hight Number of Total or Inde										<b>J</b> .		